

Article - Health - General

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§19–2201.

(a) In this section, “Fund” means the Community Health Resources Commission Fund.

(b) There is a Community Health Resources Commission Fund.

(c) (1) The Fund is a special, nonlapsing fund that is not subject to § 7-302 of the State Finance and Procurement Article.

(2) The Treasurer shall hold the Fund separately, and the Comptroller shall account for the Fund.

(d) The Fund consists of:

(1) Money collected from a nonprofit health service plan in accordance with § 14-106.1 of the Insurance Article;

(2) Interest earned on investments;

(3) Money donated to the Fund;

(4) Money awarded to the Fund through grants; and

(5) Any other money from any other source accepted for the benefit of the Fund.

(e) (1) Subject to paragraph (2) of this subsection, the Fund may be used only to:

(i) Cover the administrative costs of the Commission;

(ii) Cover the actual documented direct costs of fulfilling the statutory and regulatory duties of the Commission in accordance with the provisions of this subtitle;

(iii) Provide operating grants to qualifying community health resources; and

(iv) Provide funding for the development, support, and monitoring of a unified data information system among primary and specialty care providers, hospitals, and other providers of services to community health resource members.

(2) (i) For fiscal years 2014, 2015, and 2016, the Fund may be used for any project or initiative authorized under Title 20, Subtitle 14 of this article and approved by the Commission if no less than \$4,000,000 of the subsidy required under § 14–106(d)(2)(ii)2 of the Insurance Article is used in each fiscal year for the purposes under paragraph (1) of this subsection.

(ii) For fiscal year 2017, the Fund may be used for any project or initiative authorized under Title 20, Subtitle 14 of this article and approved by the Commission if no less than \$8,000,000 of the subsidy required under § 14–106(d)(2)(ii)2 of the Insurance Article is used in each fiscal year for the purposes under paragraph (1) of this subsection.

(iii) For fiscal year 2018, the Fund may be used for any project or initiative authorized under Title 10, Subtitle 2 and Title 13, Subtitle 3 of this article and approved by the Commission if no less than \$4,750,000 of the subsidy required under § 14–106(d)(2)(ii)2 of the Insurance Article is used in that fiscal year for the purposes under paragraph (1) of this subsection.

(iv) For fiscal year 2019 and each fiscal year thereafter, the Fund may be used for any project or initiative authorized under Title 10, Subtitle 2 and Title 13, Subtitle 3 of this article and approved by the Commission if no less than \$8,000,000 of the subsidy required under § 14–106(d)(2)(ii)2 of the Insurance Article is used in each fiscal year for the purposes under paragraph (1) of this subsection.

(3) The funding for a unified data information system under paragraph (1)(iv) of this subsection shall be limited to:

(i) \$500,000 in fiscal year 2006; and

(ii) \$1,700,000 in fiscal year 2007 and annually thereafter.

(f) The Commission shall adopt regulations that:

(1) Establish the criteria for a community health resource to qualify for a grant;

(2) Establish the procedures for disbursing grants to qualifying community health resources;

(3) Develop a formula for disbursing grants to qualifying community health resources;

(4) Establish criteria and mechanisms for funding a unified data information system; and

(5) In consultation with the Secretary, implement a program to provide subsidies to community health resources for office-based specialty care visits, diagnostic testing, and laboratory tests.

(g) In developing regulations under subsection (f)(1) of this section, the Commission shall:

(1) Consider geographic balance; and

(2) Give priority to community health resources that:

(i) In addition to normal business hours, have evening and weekend hours of operation;

(ii) Have partnered with a hospital to establish a reverse referral program at the hospital;

(iii) Reduce the use of the hospital emergency department for nonemergency services;

(iv) Assist patients in establishing a medical home with a community health resource;

(v) Coordinate and integrate the delivery of primary and specialty care services;

(vi) Promote the integration of mental and somatic health with federally qualified health centers or other somatic care providers;

(vii) Fund medication management or therapy services for uninsured individuals up to 200% of the federal poverty level who meet medical necessity criteria but who are ineligible for the public mental health system;

(viii) Provide a clinical home for individuals who access hospital emergency departments for mental health services, substance abuse services, or both; and

(ix) Support the implementation of evidence-based clinical practices.

(h) Grants awarded to a community health resource under this section may be used:

(1) To provide operational assistance to a community health resource; and

(2) For any other purpose the Commission determines is appropriate to assist a community health resource.

(i) (1) The Treasurer shall invest the money in the Fund in the same manner as other State money may be invested.

(2) Any investment earnings of the Fund shall be retained to the credit of the Fund.

(j) The Fund shall be subject to an audit by the Office of Legislative Audits as provided for in § 2-1220 of the State Government Article.

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